	⊠ REP	ORT OF LOBBYIS	ST EMPLOYER	2		
		(Government Code So	ection 86116)	_	1/8	
		or	,		1	
	□ REP	ORT OF LOBBYI	NG COALITION	J		
		Cal. Code of Regs. S		•		
<b>FORM 635</b>	,		,			
1993		ANT: Lobbying Coan pleted Form 635-C		ch a		
	REPORT COVERS P	ERIOD FROM 07/01/20	O18 THROUGH	09/30/2018	FOR OFFICIA	AL USE ONLY
	CUMULATIVE PERIO	D BEGINNING	01/01/2018		A AMENDM	ENT 001
		TYPE OR PRINT	Γ IN INK		7 IIVIETO	2111 001
	to be provided to you pursu closure Provisions of the Po		tices Act of 1977, see	I <u>nformation</u>	В	
NAME OF FILER:						
SURFRIDER FOUND	ATION					
BUSINESS ADDRESS: (Nu	umber and Street)	(City) SAN CLE		(Zip Code)	TELEPHONE NUM	IBER:
		TE TE	CA	92673		
PART I - LEGISLATIVE See instructions on reverse	VE OR STATE AGENCY	ADMINISTRATIVE AC	TIONS ACTIVELY	LOBBIED DURIN	IG THE PERIOD	
Occ mandenons on reve	5130.)					
If more space is nee	ded, check box and attach cont	inuation sheets.				
		SUMMARY OF PAY	MENTS THIS PE	RIOD		
A. Total Payments to	o In-House Employee Lobby	rists (Part III, Section A, Co	olumn 1)		\$	0.00
B. Total Payments to	Lobbying Firms (Part III, S	ection B, Column 4)			\$ 4	06.29
C. Total Activity Exp	enses (Part III, Section C) .				\$	0.00
D. Total Other Paym	ents to Influence (Part III, S	Section D)			\$ 114	42.79
GRAND 1	FOTAL (A + B + C + D al	bove)			\$154	49.08
E. Total Payments in	Connection with PUC Acti	vities (Part III, Section E)			\$	0.00
F. Campaign Contrib	outions: Part IV con	npleted and attached	X No camp	aign contributions r	nade this period	
		VERIFIC	CATION			
	l reasonable diligence in			eport and to the be	est of my knowledg	e the informa-
	I herein and in the attache penalty of perjury under		•	going is true and o	correct.	
Executed on (Date)		At (City and State)			mployer or Responsible	e Officer)
02/22/2019		Los Angeles,CA		Staley Prom		
	onsible Officer (Type or Print)			Title		
Staley Prom Lega			Legal Associate	₽		

2/8 PERIOD COVERED: <u>07/01/2018</u> 09/30/2018 NAME OF FILER: SURFRIDER FOUNDATION PART II - PARTNERS, OWNERS, AND EMPLOYEES WHOSE "LOBBYIST REPORTS" (FORM 615) ARE ATTACHED TO THIS **REPORT** (See instructions on reverse.) Name and Title Name and Title If more space is needed, check box and attach continuation sheets. PART III - PAYMENTS MADE IN CONNECTION WITH LOBBYING ACTIVITIES (1) (2)A. PAYMENTS TO IN-HOUSE EMPLOYEE LOBBYISTS **Cumulative Total Amount This** (See instructions on reverse. Also enter the Amount This Period Period To Date (Column 1) on Line A of the Summary of Payments section on page 1.) \$ \$ 0.00 0.00 B. PAYMENTS TO LOBBYING FIRMS (Including Individual Contract Lobbyists)

Name and Address of Lobbying Firm/Independent Contractor	(1) Fees & Retainers	(2) Reimbursements of Expenses	(3) Advances or Other Payments (attach explanation)	(4) Total This Period	(5) Cumulative Total to Date	
Platinum Advisors,LLC  Sacramento CA 95814	0.00	0.00	0.00	0.00	500.00	
Ecoconsult  Sacramento CA 95814	406.29	0.00	0.00	406.29	1218.87	
Sharment VA 3.014						
TOTAL THIS DEDICAL (Column 4)						

If more space is needed, check box and attach continuation sheets

**TOTAL THIS PERIOD** (Column 4) Also enter the total of Column 4 on Line B of the Summary of Payments section on page 1.

\$

406.29

PERIOD COVERED: 07/01/2018 09/30/2018

NAME OF FILER: SURFRIDER FOUNDATION

C. ACTI	VITY EXPENSES (See instructions on rever	se.)				
Date	Name and Address of Payee	Name and Official Position of Reportable Persons and Amount Benefiting Each  Description of Consideration			1	Total Amount of Activity
			\$		\$	
If more space is needed, check box and attach continuation sheets.  TOTAL SECTION C (Activity Expenses) Also enter the total of Section C on Line C of the Summary of Payments section on page 1.						0.00
D. OTHER PAYMENTS TO INFLUENCE LEGISLATIVE OR ADMINISTRATIVE ACTION  NOTE: State and local government agencies do not complete this section. Check box and complete Attachment Form 640 instead.  1. PAYMENTS TO LOBBYING COALITIONS (NOTE: You must attach a completed Form 630 to this Report.)  \$ 406.29						
2. OTHER PAYMENTS  TOTAL SECTION D (1 + 2) Also enter the total of Section D on Line D of the Summary of Payments section on page 1.					\$	1549.08
E. PAYMENTS IN CONNECTION WITH ADMINISTRATIVE TESTIMONY IN RATEMAKING PROCEEDINGS BEFORE THE CALIFORNIA PUBLIC UTILITIES COMMISSION Also, enter the total of Section E on Line E of the Summary of Payments section on page 1. (See instructions on reverse.)					\$	0.00

PERIOD COV	ERED: <u>07/01/2018</u> <u>09/30/2018</u>					
NAME OF FIL	ER: SURFRIDER FOUNDATION					
made to or on	PART IV CAMPAIGN CONTRIBUTIONS MADE (Monetary and non-monetary campaign contributions of \$100 or more made to or on behalf of <u>state</u> candidates, elected state officers and any of their controlled committees, or committees supporting such candidates or officers must be reported in A or B below.)					
<ul> <li>A. If the contributions made by you during the period covered by this report, or by a committee you sponsor, are contained in a campaign disclosure statement which is on file with the Secretary of State, report the name of the committee and its identification number, if any, below.</li> <li>Name of Major Donor or Recipient Committee Which Has Filed A Campaign Disclosure Statement:</li> </ul>						
	ributions of \$100 or more which have not been reported on a campaig by an organization's sponsored committee, must be itemized below.	n disclosure statement, inc	luding contributions			
Date	Name of Recipient	I.D. Number if Committee	Amount			
			\$			
			\$			
			\$			
			\$			
			\$			
			\$			
			\$			
			\$			
			\$			
			\$			
If more space is needed, check box and attach continuation sheets.						

# ATTACHMENT FORM 630 PAYMENTS MADE TO LOBBYING COALITIONS

(Attachment to Form 625 or 635)

FORM 630	Period Covered07/01/20	18	_ Through	09/30/2018	3
1990	Cumulative Period Beginning	01	/01/2018		
	Cumulative i chica Boginimig				<del></del>
Name of Lobbying Firm or Lobbyist Em SURFRIDER FOUNDATION	ployer Making Payments:				
Name and Busin Lobbying Coalition Ro			Amount Paic This Period		Cumulative Amount Paid Since January 1 of Biennial Legislative Session
Clean Seas Lobbying Coalition		\$	406.29	,	\$ 1218.87
San Clemente CA 92673 Reference No: 3					

## **Attachment Form 640**

(Attachment to Form 635 or Form 645)

CALIFORNIA
1993 FORM
640

6/8

PERIOD COVERED: <u>07/01/201809/30/2018</u>		0/0		
NAME OF FILER: SURFRIDER FOUNDATION				
For Use By: A state or local government agency that qualifies as instructions on the cover page before completing this		0 filer. Refer to the		
Other Payments to Influence Legislative or Administrative Action:				
Total payments for overhead expenses related to lobbying activity.      Report as a lump sum.		\$\$		
Total payments to Lobbying Coalitions. Report as a lump sum. (Form 630 must be attached)		\$		
Total payments of less than \$250 during the calendar quarter for loactivity (excluding overhead). Report as a lump sum.	bbying	. \$0.00		
<ol> <li>Total payments of more than \$250 during the calendar quarter for activity (excluding overhead). Such payments must be itemized be</li> </ol>		\$ <u>1065.39</u>		
<ol> <li>Grand total of "Other Payments to Influence Legislative or Adminis Action." Also enter this total on the appropriate line of the Summal Payments section on Page 1 of Form 635 or Form 645.</li> </ol>	ry of	\$ 1549.08		
Itemize below payments of \$250 or more made during the quarter for lobbying activity. Provide the name and address of the payee, the amount paid during the quarter, and the cumulative amount paid to the payee since January 1 of the biennial legislative session covered by the report.  Also itemize dues or similar payments of \$250 or more made to an organization that makes expenditures equal to 10% of its total expenditures or \$15,000 or more in a calendar quarter to influence legislative or administrative action. Provide the organization's name and address, the amount paid to the organization during the quarter, and the cumulative amount paid to the organization since January 1 of the biennial legislative session covered by the report.				
Name & Address of Payee	Amount This Quarter	Cumulative Amount Since January 1		
\$ \$				
	\$	\$		
	\$	\$		
Subtotal of all payments itemized above	\$ 0.00			
If more space is needed, check box and attach continuation sheets.				

# AMENDMENT TO LOBBYING DISCLOSURE REPORT

	S AMENDING REPORTS F MENT CODE SECTIONS 8		JANT			
FORM 690 1990	FOR OFFICIAL USE ONLY					
For information required to be provided to you pursuan Manual on Lobbying Disclosure Provisions of the Politic		es Act of 1977	7, see Information	В		
NAME OF FILER: SURFRIDER FOUNDATION  NAME OF EMPLOYER OR FIRM: (If this amendment is being fi						
USINESS ADDRESS OF FILER: (Number and Street) (City) (State) (Zip Code) TELEPHONE NUMBER:  SAN CLEMENTE CA 92673						
(The information required must correspond to the information provided on the original report filed.)  1. The following information amends the lobbying disclosure report Form No. F635 executed on 10/26/2018 (Mo Day - Year)						
for the period07/01/2018 to09/30/2018  Reporting Period; P Section(s) Part III(B)  2. Amended information affects items on Part(s) art III(B)						
3. Describe changes below.						
Typo in the reporting period end date; Forg	got to total payments to	lobbying firn	ns in part III(B).			

#### **VERIFICATION**

I have used all reasonable diligence in preparing this Amendment. I have reviewed the Amendment and to the best of my knowledge the information contained herein is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on (Date) 02/22/2019	At (City and State) Los Angeles,CA	By (Signature of Filer) Staley Prom
Name of Filer (Type or Print) Staley Prom		Title Legal Associate

# **TEXT ANNOTATION**

## PAGE 2

Schedule F635P3B Reference No: 2

For Clean Seas Lobbying Coalition lobbying.

# PAGE 5

Schedule S630 Reference No: 3

This was paid to lobbyist Ecoconsult (and is the same amount reported in the Lobbyist Firms section)